## APPEAL NO. 042299 FILED NOVEMBER 1, 2004

This appeal arises pursuant to the Texas Workers' Compensation Act, TEX. LAB. CODE ANN. § 401.001 *et seq.* (1989 Act). A contested case hearing (CCH) was held on August 23, 2004. The hearing officer determined that the correct date of injury (DOI) is \_\_\_\_\_\_; that on that date the respondent (claimant) sustained a compensable injury to her right wrist; that the claimant notified her employer of the right wrist injury on \_\_\_\_\_\_; and that the claimant had disability from December 4, 2003, through June 5, 2004, and from August 9, 2004, through the date of the CCH.

The appellant (self-insured) appealed, contending that the DOI is (alleged date of injury); that the claimant had not timely reported her claimed injury; and that the claimant had failed to prove a causal connection between her job and, what the self-insured characterizes as, a right carpal tunnel syndrome (CTS) injury. The claimant responds, urging affirmance.

## DECISION

Affirmed.

The claimant, a cafeteria worker, sustained a prior compensable left wrist injury on (prior date of injury). In a report dated (alleged date of injury), the treating doctor summarized electrodiagnostic testing as showing "bilateral carpal tunnel mildly severe." The self-insured contends that this established the DOI pursuant to Section 408.007. The claimant testified that she did not know what "bilateral carpal tunnel" was. The claimant was found to be at maximum medical improvement on July 21, 2003, with a 4% impairment rating for the (prior date of injury), injury. The claimant had returned to work in early August 2003. The hearing officer found that on \_\_\_\_\_\_\_, the claimant "aggravated a preexisting right wrist condition or injured her right wrist as a result of repetitive work with her right hand while working for employer." It is undisputed that the claimant reported her injury to the employer on \_\_\_\_\_\_\_.

The DOI for an occupational disease (which includes a repetitive trauma) is set out in Section 408.007. There was conflicting evidence as to the nature of the compensable injury, what the claimant knew or should have known on (alleged date of injury), and the nature of her job duties prior to the injury at issue here. The matters at issue presented questions of fact for the hearing officer to resolve. The hearing officer is the sole judge of the weight and credibility of the evidence. Section 410.165(a). As the finder of fact, the hearing officer was charged with the responsibility of resolving the conflicts and inconsistencies in the evidence and deciding what facts the evidence had established. Garza v. Commercial Insurance Company of Newark, New Jersey, 508 S.W.2d 701 (Tex. Civ. App.-Amarillo 1974, no writ). The hearing officer could believe all, part, or none of the testimony of any witness, including that of the claimant (Aetna Insurance Company v. English, 204 S.W.2d 850 (Tex. Civ. App.-Fort Worth 1947, no

writ)). The hearing officer was acting within his province as the fact finder in resolving the conflicts and inconsistencies in the evidence in favor of the claimant. The hearing officer's decision is supported by sufficient evidence and is not so against the great weight of the evidence as to be clearly wrong or manifestly unjust. Cain v. Bain, 709 S.W.2d 175, 176 (Tex. 1986). Accordingly, no sound basis exists for us to disturb those determinations on appeal.

The hearing officer's decision and order are affirmed.

The true corporate name of the insurance carrier is (a self-insured governmental entity) and the name and address of its registered agent for service of process is

SUPERINTENDENT
(ADDRESS)
(CITY), TEXAS (ZIP CODE).

CONCUR:	Thomas A. I Appeals Jud	
Veronica L. Ruberto Appeals Judge		
Edward Vilano Appeals Judge		